DECLARATION AND POWER OF ATTORNEY

Docket No. X-16292

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first, and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the invention entitled

COMPOUNDS, METHODS AND FORMULATIONSF FOR THE ORAL DELVIERY OF A GLUCAGON LIKE PEPTIDE (GLP)-1 COMPOUND OR AN MELANOCORTIN 4 RECEPTOR (MC4) AGONIST PEPTIDE

which is descr	ibed and claimed in the spec	fication which:	
(check ☐ one) ⊠ or			
		erstand the contents of the above identified added by any amendment referred to above.	
I acknowledge 37 C.F.R. 1.56		tion which is material to patentability as defined	
	the benefit under Title 35, U tent application(s) listed belo	Inited States Code, §119(e) of any United States ow.	
60/496,537 (Application N	- Vumber)	20 August 2003 (Filing Date)	
(Application N	Number)	(Filing Date)	
Power of Attorney: As a named inventor, I hereby appoint the attorneys and/or agent(s)			

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business in the Patent and Trademark Office.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Full Name of Sole or or First Inventor Inventor's Signature	: Robert Jason HERR : Robert Jason HERR Date: 17 Aug 2004
Residence Address	: 248 New Salem South Voorheesville, New York 12186
Post Office Address Citizenship	United States of America : SAME AS ABOVE : United States of America
Full Name of Second Joint Inventor, if Any:	Louis Nickolaus JUNGHEIM
Inventor's Signature:	Date:
Residence Address	: 8218 Meadowbrook Drive Indianapolis, Indiana 46240
Post Office Address Citizenship	United States of America : SAME AS ABOVE : United States of America
Full Name of Third Joint Inventor, if Any:	John McNeill MCGILL, III
Inventor's Signature	: Date:
Residence Address	: 2254 Arden Place Greenwood, Indiana 46143 United States of America
Post Office Address Citizenship	: SAME AS ABOVE : United States of America

Full Name of Fourth Joint Inventor, if Any: Kenneth Jeff THRASHER Date: _____ Inventor's Signature: Residence Address : 8660 Count Turf Court Indianapolis, Indiana 46217 United States of America SAME AS ABOVE Post Office Address Citizenship : United States of America Full Name of Fifth Joint Inventor, if Any: Muralikrishna VALLURI Date: 08 17 2004 Inventor's Signature: Residence Address : 11 Elm Court, Apartment C Rensselaer, New York 12144 United States of America Post Office Address SAME AS ABOVE

: India

Citizenship

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which is described and claimed in the specification which: is attached hereto. (check was filed on as United States one) Application Serial No. or PCT International Application No.PCT/US04/24386 and was amended on _____ (if applicable). I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to patentability as defined 37 C.F.R. 1.56. I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional patent application(s) listed below. 60/496,537 20 August 2003 (Application Number) (Filing Date) (Application Number) (Filing Date)

<u>Power of Attorney</u>: As a named inventor, I hereby appoint the attorneys and/or agent(s) associated with customer number 25885 to prosecute this application and transact all business in the Patent and Trademark Office.

Send correspondence to the address associated with the customer number.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Full Name of Sole or or First Inventor Inventor's Signature	: Robert Jason HERR : Date:
Residence Address	: 248 New Salem South Voorheesville, New York 12186 United States of America
Post Office Address Citizenship	: SAME AS ABOVE : United States of America
Full Name of Second	Louis Nickolaus-JUNGHEIM
Tomic diversion, if Ally.	
Inventor's Signature:	Date: 2/1/05
Residence Address	: 8218 Meadowbrook Drive Indianapolis, Indiana 46240
Post Office Address Citizenship	United States of America : SAME AS ABOVE : United States of America
Full Name of Third	
Joint Inventor, if Any:	John McNeill MCGILL, III
Inventor's Signature	: Ole Mileil Mil Ht Date: 3/22/05
Residence Address	: 2254 Arden Place Greenwood, Indiana 46143 United States of America
Post Office Address Citizenship	: SAME AS ABOVE : United States of America

Full Name of Fourth Joint Inventor, if Any: Kenneth Jeff THRASHER Inventor's Signature: Kuth Joy 7hh Date: 2/2/05 Residence Address : 8660 Count Turf Court Indianapolis, Indiana 46217 United States of America Post Office Address SAME AS ABOVE : United States of America Citizenship Full Name of Fifth Joint Inventor, if Any: Muralikrishna VALLURI Inventor's Signature: ____ ____ Date: _ Residence Address : 11 Elm Court, Apartment C Rensselaer, New York 12144 United States of America Post Office Address SAME AS ABOVE

: India

Citizenship